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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

112959.132

In re Application of John D. Mendlein

Application Number 09/314,206

Filed 05/19/1999

For ULTRASONIC TRANSMISSION FILMS . . .

Group Art Unit 3737

Examiner F.J. Jaworski

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |   |        |
|---|--------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$     |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$     |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$     |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$     |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-0219.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

03/18/2003

Date

03/27/2003 JBALINAN 00000085 080219 09314206

01 FC:225 55.00 CH

Ibrahim M. Hallaj  
Signature

Ibrahim M. Hallaj

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.